Under the P	sperwork R	eduction A	ct of 199:	i, no penso	uz sie i	equired to resc	ond (U.S. Patent :	and Tra	demark (office: U	S. OER	MILLEN	UMB OSSUU
U.S. Patent and Trademark C Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information or PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875												opiaya	8 YEM OL	Number 6
CLAIMS AS FILED - PART I												.09	122	1350_ IER THAI
		, (c	ciumn 1	(Column 2)			SMALL ENTITY			_	RÍ	SMAL	LL ENTIN	
FOR BASIC FEE		HUMBER FILED			NUMBER EXTRA		4	· RATE	\bot	FEE			RATE	· FE
(37 OFR 1.16(a	S	10					4	75	_ 3		_ 01	3 L		1
(37 OFR 1.16(c	CLAIMS	minus 20 e						x : 2	_انــ		OF	x x	<u>,50.</u>	
(37 CFR 1.16(b	1)	3) "MING 3 E		•		_	× 100	_		OF		,200	1
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								+5180			ОЯ	.	360°	
If the difference in column 1 is less than zero, enter ${\bf T}$ in column 2.								TOTAL			OR		TOTAL	1
And a	CLAIM	S AS AN	MENDE	0 - PAF	RT II			•						L
10 19 00 (Column 1) (Column 2) (Column 3)						1	SMALL ENTITY			OR			R THAN	
Y Y	RE	CLAIMS LEMAINING AFTER MENOMENT		PREV	HEST MBER: IOUSLY IFOR	PRESENT EXTRA		RATE	ADDI- FIONAL].		RATE	ENTITY ADD
Total Sindepender Uli Grander Uli Grander	(ci)	6	Minus	1 2	0	1.0	7	x.25.	+-	FEE		-	50.	FEI
Independent (31 OFR 6.16	on ,	3	Minus	1 3		10	1	100.	†		OR	-	200	
FRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							1	+ 180	†		OR OR	X 5		
		1/	2-1	3-		7	,	TOTAL ADD'L FEE	L		OR	TOT.	AL L FEE	
, 		umn 1) U	/ !	(Coli	Jan 2)	(Column 3)	٦,						. `	
Lates to the first of the first	REM	AININO TER DUENT		PREVIO	BER	PRESENT EXTRA		RATE	TIC	DOI- DNAL EE		R	ATE	ADDI- TIONAL
Ch Charring		\mathcal{U}	Minus			•	ľ	<u> </u>			OR	X S	Б.	FEE
trdependent CFR L. KO		\mathcal{L}	· Minus	70	5_	•	M	×: <u>100</u> .			OR	× 52		
FRIST PRESENTATION OF MALTIPLE DEPENDENT CLEAN (37 CFR 1.16(4))								+ <u> </u>			OR		00	
			•	*			_	TOTAL ADO'L FEE			OR	TOTA		
		mn 1)		(Cotur	na 2)	(Caturn 3)	_						٠. ـ	
	REM	aims ' Anning Ter Dment		HIGHE NUMB PREVIO PAID F	USLY	PRESENT		RATE	AD	NAL		RA	TE	ADDI
Total promused independent	•		Minus	**		: 		25.	· FE	-	<u> </u>	x ,5	0	FEE
Independent	1		Minus	*** .	\longrightarrow	-	-				OR	× 2 0	<u> </u>	

ADD'L FEE OR COMPLETED FORMS TO THIS ADD'R FEE'S OR COMPLETED FORMS TO THIS ADD'R FEE'S OR COMPLETED FORMS TO THIS ADD'R FEE'S OR COMPLETED FORMS TO THIS ADD'L FEE OR ADD'L FEE OR COMPLETED FORMS TO THIS ADD'L FEE'S OR COMPLETED FORMS TO THIS ADD'L FEE OR ADD'L FEE OR COMPLETED FORMS TO THIS ADD'L FEE OR ADD'L FEE OR COMPLETED FORMS TO THIS ADD'L FEE OR ADD'L FEE OR COMPLETED FORMS TO THIS ADD'L FEE OR ADD'L FEE OR COMPLETED FORMS TO THIS ADD'L FEE OR ADD'L FEE OR COMPLETED FORMS TO THIS ADD'L FEE OR ADD'L

If you need assistance in completing the form, cell 1-800-P TO-9199 and saled option 2

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(d))

+ 5180.

TOTAL ADD'L FEE

OR

OR